For Utility. PCT, and Design Applications

• INSTRUCTIONS

MERCHANT & GULLD

United States Patent Application MBINED DECLARATION AND POWER OF ATTORNEY

below named inventor I hereby declare that: my residence, post office address and citizenship are as clow next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert TITLE of invention	NOIL FO	R USE IN PAPER	MANUFACTURE, M	ETHOD FOR ITS		
	PRODUCT	ION, AND PAPER	PULP AND PAPER	CONTAINING SUCH		
Check a or b	The specification of w	hich				
	a. 🛭 is attached heret	0				
	b. 🗆 was filed on					
If "b" checked, complete	b. 🗌 was filed onas application serial no					
				(if applicable)		
f PCT Application	(in the case of PCT-file		,,	, ,,		
nsert Int. application number & filing date	described and claimed	in international no.				
	and as amended on (if any), which I have reviewed and for which I solicit a United States patent.					
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.					
	I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37. Code of Federal Regulations, § 1.56(a). (Reprinted on back side).					
	I hereby claim foreign priority benefits under Title 35. United States Code, § 119/365 of any foreign application(s) for patent of inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on the basis of which priority is claimed:					
rior applications Tack a or b	a. 🗷 no such applications have been filed.					
	b. a such applications have been filed as follows:					
	FOREIGN APPLICATION(S). IF ANY, CLAIMING PRIORITY UNDER 35 USC § 119					
	COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	DATE OF ISSUE (day, month, year)		
	FI	980296	09.02.1998	(say, monar, year)		
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If "b" checked, complete

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F I	980296	09.02.1998	
	APPLICATIONS. IF ANY, FILE	D BEFORE THE PRIORIT	Y APPLICATION(S)
COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	DATE OF ISSUE (day, month, year

I hereby claim the benefit under Title 35. United States Code. § 120/365 of any United States and PCT international application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35. United States Code. § 112. I acknowledge the duty to disclose material information as defined in Title 37. Code of Federal Regulations. § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

Revised 12:6:95

For Continuation-in-Part (CIP) Applications, complete

		verse leges
U.S. APPLICA NUMBER	DATE OF FILING (day.month.year)	JS (patented.pending.abandoned)

I hereby appoint the following attorney(s) and/or patent agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith:

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I hereby authorize them to act and rely on instructions from and communicate directly with the person/assignee/attorney/firm/organization/who/which first sends/sent this case to them and by whom/which I hereby declare that I have consented after full disclosure to be represented unless/until I instruct Merchant & Gould to the contrary.

Please direct all correspondence in this case to Merchant, Gould. Smith, Edell, Welter & Schmidt at the address indicated below (or if no address is specified, the first address):

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DATE	23.10.199	8	DATE		DATE

ogn & date

Each inventor must

Insert FULL name(s) AND address(es) of actual inventor(s)

lote: No legalization or their witness required

levised 12/6/95

For Additional Inventors:

Check box and attach sheet with same information, including date and signature.